SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:						PAGE	: 3	48 OF	1	459
(c	(check only one)									
	X	11a		11b		11c		12		
		13		14		15		16		17

	Statements may not be sold or used by any pers ne name and address of any political committee to							
NAME OF COMMITTEE (In Full) REPUBLICAN NATIONAL COMMITTEE								
Full Name (Last, First, Middle Initial) DR. DAVID L. ELSON Mailing Address 513 E. PLUM CREEK ROAD	Date of Receipt O2 17 2015							
City	City State Zip Code							
SIOUX FALLS	SD 57105-6950	Transaction ID : 2015M03L11AI00900 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	C	200.00						
Name of Employer	Occupation							
AVERA HEALTH	PHYSICIAN							
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 950.00							
<u> </u>								
Full Name (Last, First, Middle Initial) 3. DR. J. FRANCIS TURNER JR.	DR. J. FRANCIS TURNER JR.							
Mailing Address 9065 HERRERA AVENUE	Mailing Address 9065 HERRERA AVENUE							
City	State Zip Code	02 25 2015 Transaction ID : 2015M031 11 A 100901						
LAS VEGAS	NV 89129-3693	Transaction ID : 2015M03L11Al00901 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	C	335.00						
Name of Employer	Occupation							
C.T.C.A.	PHYSICIAN							
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 335.00							
Full Name (Last, First, Middle Initial) DR. PATRICK ROBERT FEEHA	N	Date of Receipt						
Mailing Address 584 NORTHLAWN DRIVE								
City LANCASTER	State Zip Code PA 17603-2381	02 18 2015 Transaction ID : 2015M03L11Al00902 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	C	250.00						
Name of Employer	ame of Employer Occupation							
• •	DERMATOLOGY ASSOCIATES OF LANCASTI PHYSICIAN							
Receipt For:	Aggregate Year-to-Date ▼							
Primary General Other (specify) ▼	250.00							
SUBTOTAL of Receipts This Page (optional)	<u> </u>	785.00						
TOTAL TIL D. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1.								
TOTAL This Period (last page this line number only)								